

**Application Data Sheet****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	INDUSTRIAL TOMOATO PROCESS AND PRODUCT OBTAINED THEREOF
Attorney Docket Number::	ZELKHA6
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
<b>Applicant Information</b>	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Morris

Middle Name::  
Family Name:: ZELKHA  
Name Suffix::  
City of Residence:: Omer  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: 10 Hadar Street  
City of Mailing Address:: Omer  
State or Province of Mailing Address::  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 84965  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Dov  
Middle Name::  
Family Name:: HARTAL  
Name Suffix::  
City of Residence:: Tel-Aviv  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: 6 Ugarit Street, Tel Baruch  
City of Mailing Address:: Tel-Aviv  
State or Province of Mailing Address::  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 69016  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Zvi  
Middle Name::  
Family Name:: ALBERT  
Name Suffix::

City of Residence:: Kiryat Bialik  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: 14 Keren Kayemet Street  
City of Mailing Address:: Kiryat Bialik  
State or Province of Mailing Address::  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 27093

**Correspondence Information**

Correspondence Customer Number:: 001444

**Representative Information**

Representative Customer Number:: 001444

**Domestic Priority Information**

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	National Stage of	PCT/IL03/000678	08-17-03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Israel	151342	08-19-02	Yes

**Assignment Information**

Assignee Name:: Lycored Natural Products Industries Ltd.  
Street of Mailing Address:: P.O. Box 320  
City of Mailing Address:: Beer Sheva  
State or Province of Mailing Address::  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 84102